

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>5-3-07</u>		2 Serial/Patent # <u>09/825258</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT						
	Filing			\$						
	Amendment			\$						
	Extension of Time			\$						
	Notice of Appeal/Appeal			\$						
<input checked="" type="checkbox"/>	Petition		6-21-06	\$ 400						
	Issue			\$						
	Cert of Correction/Terminal Disc.			\$						
	Maintenance			\$						
	Assignment			\$						
	Other			\$						
7 TOTAL AMOUNT OF REFUND			\$ 400							
8 TO BE REFUNDED BY:										
10 REASON:		<input checked="" type="checkbox"/>	Treasury Check <i>Credit Card</i>							
	Overpayment		Credit Deposit A/C #:							
	Duplicate Payment		9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							
<input checked="" type="checkbox"/>	No Fee Due (Explanation):									
Request for expedited consideration of fee to resume not given										
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: Frances Hicks		TITLE: Petitions Examiner								
SIGNATURE: <u>Frances Hicks</u>		PHONE: x23218								
OFFICE: Office of Petitions										
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****										
APPROVED: <u>CKH/05</u>		DATE: <u>5/3/07</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B